

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**

SERIAL NO

10656103

FILING DATE

08-08-03

APPLICANT(S)

**CLAIMS**

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT									
	IND	DEP	IND	DEP	IND	DEP		IND	DEP	IND	DEP	IND	DEP	
1			/				51							
2				/			52							
3							53							
4				/			54							
5				/			55							
6				/			56							
7				/			57							
8				/			58							
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11				/			61							
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13				/			63							
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43							93							
44							94							
45							95							
46							96							
47							97							
48							98							
49							99							
50							100							
TOTAL IND.			2					TOTAL IND.						
TOTAL DEP.			23					TOTAL DEP.						
TOTAL CLAIMS			25					TOTAL CLAIMS						